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APPLICANTS

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** CONTINUING DATA *****
 This application is a DIV of 09/539,739 03/31/2000 PAT 6,605,589 *Verified TS*

** FOREIGN APPLICATIONS *****
None TS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Teresa Stuebele TS</i> Examiner's Signature Initials	STATE OR COUNTRY MN	SHEETS DRAWING 6	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
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TITLE
 Cathepsin inhibitors in cancer treatment

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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